



## STATE OF IOWA

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DEPARTMENT OF HUMAN SERVICES  
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# Gessow Notes Progress, Needs at Glenwood; Woodward Advances

**DES MOINES, Iowa**—A U.S. Department of Justice investigation of nine deaths at the Glenwood Resource Center last year shows that a delay in reporting a deteriorating medical condition may have contributed to one death but that there were no “systemic issues” with any of the others.

Department of Human Services Director Gene Gessow acknowledged the error in the one case and said the facility has already put in place a plan of correction to prevent a recurrence.

Gessow also said he was pleased that the latest report shows rapid advances toward reaching DOJ civil rights standards.

“I have made a personal commitment to providing state-of-the-art care for residents at Glenwood, and doing it with compassion and dignity. I’m gratified that this latest report shows us heading, rapidly, toward our goal,” Gessow said.

In its latest report, received late Friday, the DOJ said Glenwood has made speedy progress, especially in recent months, toward reaching standards established in a 2004 civil rights settlement with the state.

“We recognize that GRC has undertaken significant improvements in nursing and medical care, especially in the latter half of 2008, and that facility staff have worked hard to achieve these improvements,” the report said.

Gessow said he is also pleased that GRC’s sister agency in Woodward was recognized as nearing compliance with DOJ standards. “We congratulate the state and staff of WRC for achieving compliance with the great majority of the plan’s requirement for WRC,” the report said.

Glenwood is home to more than 300 people with mental retardation. More than half are profoundly retarded, three-fourths have a severe swallowing disorder, half have a seizure disorder, two-thirds have a diagnosed mental illness, a third are completely non-ambulatory, and many cannot speak and thus have difficulty participating in their care.

A total of 12 residents of Glenwood died last year, compared to 11 in 2006 and lower numbers in 2004, 2005, and 2007. In October and November last year, the DOJ investigated the histories of nine of the deaths that had occurred prior to that time. A tenth person died during the review period “but was not covered in our review because the circumstances of this death did not suggest the existence of possible systemic issues,” the DOJ said.

Regarding the one death, the DOJ said a contributing factor was a delay in notification of a doctor about deteriorating respiration.

“Had the facility responded in a more timely manner, the worsening condition that ultimately led to this person’s death might have been abated or stopped,” the DOJ said.

“As to the other eight deaths, the information we reviewed did not indicate the existence of systemic issues,” the report said.

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To reach DOJ standards, GRC must comply with 13 major areas. Each one includes between two to 40 individual measures. The facility remains in compliance regarding several areas, including neurology, psychiatry, and transition to the community. The latest DOJ report said significant improvement was observed in medical and nursing standards, with compliance likely if GRC keeps its operation at a high level.

The DOJ also outlined several areas of need. Some of them have been addressed since the last DOJ visit in November, including a revised documentation procedure for physicians, a nursing protocol that more clearly outlines nurse-physician communication, and improved staff training.

The report complimented GRC's internal quality assurance system in catching errors.

"GRC's internal quality assurance processes largely detected the same breakdowns in these areas that we uncovered, which is fundamental to the facility's ability to correct such breakdowns and avoid reoccurrence going forward," the report said.

Finally, the report complimented the state's method of reporting errors in dispensing medicine. Thousands of doses of medicine are administered every day but errors occur. GRC and WRC have launched a non-punitive system that encourages staff to report "medication variances" as opposed to the more reactive "medication error" method.

"We believe this to be a commendable action. Indeed, a medication variance system encourages the reporting of both actual and potential discrepancies," the report said.

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Editors Note: The latest reports are posted on the DHS website, including the DOJ cover letter, DOJ interviews with directors of nursing and medicine, the DOJ matrix showing areas of compliance, a DHS bullet-point summary of the latest findings, and this news release.